

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant(s): Sakari Kotola et al.

Group Art Unit: 2618

Serial No.: 10/801,598

Examiner: Nguyen, S.

Filed: March 17, 2004

For: SYSTEM AND METHOD FOR REMOTE SERVICE INFORMATION

INFORMATION DISCLOSURE STATEMENT

Mail Stop
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

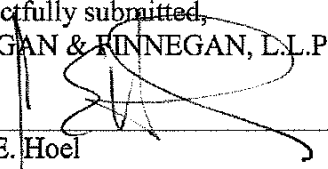
Pursuant to Rule 56, applicant hereby calls the attention of the Patent Office to the references listed on the attached Form PTO 1449.

Copy(ies) of these references:

- ☒ Foreign Patent Applications, Foreign Patents and/or Other Non-Patent Documents are attached (Copies of cited U.S. Patents/Publications are not provided).
- ☐ Were filed in related application U.S. Serial No(s) , filed , respectively.
- ☐ This document is being filed within three (3) months of the filing date of the application
- ☐ A check for the requisite fee of \$180 is enclosed.
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- ☒ The Commissioner is hereby authorized to charge any additional fees which may be required for this Information Disclosure Statement, or credit any overpayment to Deposit Account No. 13-4500, Order No. 4208-4183. A DUPLICATE COPY OF THIS SHEET IS ATTACHED.

Respectfully submitted,
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Dated: March 20, 2007

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FORM PTO-1449A INFORMATION DISCLOSURE CITATION	Attorney Docket: 4208-4183	Serial No.: 10/801,598
	Applicant: Sakari KOTOLA et al.	
	Filing Date: March 17, 2004	Group Art Unit: 2685

U.S. PATENT / PUBLICATION DOCUMENTS

Examiner Initial		Patent/Publication Number	Publication/Issue Date	Name	Filing Date
	1.	2002/0044549	04-2002	Johansson et al.	
	2.				
	3.				
	4.				
	5.				
	6.				
	7.				
	8.				
	9.				
	10.				
	11.				
	12.				
	13.				
	14.				

FOREIGN PATENT DOCUMENTS

Examiner Initial		Patent Number	Publication Date	Country	Copy Filed	Translation
	15.				<input type="checkbox"/> Yes	<input type="checkbox"/> Yes <input type="checkbox"/> No
	16.				<input type="checkbox"/> Yes	<input type="checkbox"/> Yes <input type="checkbox"/> No
	17.				<input type="checkbox"/> Yes	<input type="checkbox"/> Yes <input type="checkbox"/> No
	18.				<input type="checkbox"/> Yes	<input type="checkbox"/> Yes <input type="checkbox"/> No
	19.				<input type="checkbox"/> Yes	<input type="checkbox"/> Yes <input type="checkbox"/> No

Examiner	Date Considered
EXAMINER: Initial if reference considered, whether or not citation is in conformance with MPEP §609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to Applicant.	